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Bib Data Sheet

CONFIRMATION NO. 8693

<b>SERIAL NUMBER</b> 10/671,849	<b>FILING OR 371(c) DATE</b> 09/25/2003 <b>RULE</b> 1.47	<b>CLASS</b> 345	<b>GROUP ART UNIT</b> 2628	<b>ATTORNEY DOCKET NO.</b> 372465-01501
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* N/A AC.

\*\* FOREIGN APPLICATIONS \*\*\*\*\* N/A AC.

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
12/16/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 15	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>[Initials]</i> Initials			

## ADDRESS

37509

## TITLE

Anti-aliasing line pixel coverage calculation using programmable shader

<b>FILING FEE RECEIVED</b> 2244	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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